

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Nampa Housing Authority

PHA Number: ID002

PHA Fiscal Year Beginning: 10/2001

PHA Plan Contact Information:

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Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan**Fiscal Year 2002**

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Attachments

- ☒ Attachment A : Supporting Documents Available for Review
- ☒ Attachment B: Capital Fund Program Annual Statement
- ☒ Attachment C: Capital Fund Program 5 Year Action Plan
- ☐ Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement
- ☐ Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ Attachment D: Resident Membership on PHA Board or Governing Body
- ☒ Attachment E: Membership of Resident Advisory Board or Boards
- ☒ Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- ☒ Other:
- Attachment G: Description of Community Service Program
- Attachment H: Description of Pet Policy
- Attachment I: Fair Housing Certification
- Attachment J: Progress in Accomplishing Goals
- Attachment K: PHA Certifications of Compliance with the PHA Plans and Related Regulations Board Resolution to Accompany the Plan (Certification and Resolution)
- Attachment L: Disclosure of Lobbying Activities (Certification: Lobbying Activities)
- Attachment M: Certification for Drug-Free Workplace (Certification: Drug Free)
- Attachment N: Certification of Payments to Influence Federal Transactions (Certification: Influence Federal Transactions)

Attachment O: Statement by State or Local Official of PHA Plans Consistency with the Consolidated Plan

Attachment P: Resolution 507, Approval of the Annual Plan for 2001 (PHA Resolution)

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$309,038

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family’s resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment F, RAB Comments to the One and Five Year Plan
3. In what manner did the PHA address those comments? (select all that apply)
- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment ____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- ☒ Other: The RAB endorsed the PHA Plan as presented.

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- ☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

None

B. Significant Amendment or Modification to the Annual Plan:

None

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents.	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Draft cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program: ID16P1600250100 Capital Fund Program Replacement Housing Factor Grant No: N/A			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	21 850		10 248.94	10 248.94
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	10 000		00	00
8	1440 Site Acquisition				
9	1450 Site Improvement	75 000		4 750.00	4 750.00
10	1460 Dwelling Structures	180 550		70 474.40	66 073.48
11	1465.1 Dwelling Equipment—Nonexpendable	12 727		3 006.60	3006.60
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	3 000		00	00
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	303 127		98 479.94	84 079.02
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program: ID16P1600250100 Capital Fund Program Replacement Housing Factor Grant No: N/A			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program #: ID16P00250100 Capital Fund Program Replacement Housing Factor #: N/A				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		21 850		10 248.94	10 248.94	On Going
HA-Wide	Architectural/Consultant Fee	1430		10 000		10 000	00	On Going
ID2-1	Underground Sprinklers	1450		75 000		4 750.00	4 750.00	Completed
ID2-1	Replace 25 Countertops	1460		12 500		00	00	----
ID2-1	Install 75 Dishwashers	1460		55 250		00	00	----
ID2-1	Complete Tub Inserts	1460		16 000		68 018.40	63 617.48	
ID2-1	Replace Gutters	1460		2 500		2 456.00	2 456.00	Completed
ID2-2	Replace Kitchen Countertops Cabinets & Install Dishwashers	1460		63 000		00	00	----
ID2-2	Replace Bathroom Vanities & Hardware	1460		12 000		00	00	----
ID2-2	Replace Gutters	1460		2 500		00	00	----
ID2-2	Replace Doors Brickmolding & Paint	1460		15 000		00	00	----
ID2-2	Smoke Detectors	1460		1 800		00	00	----
ID2-1	New Refrigerators & Ranges	1465.1		12 727		3006.60	3 006.60	On Going
ID2-1	Relocation Costs	1495		3 000		00	00	----

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program: ID16P00250101 Capital Fund Program Replacement Housing Factor Grant No: N/A			Federal FY of Grant: <div style="text-align: center;">2001</div>
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: </div> <div> <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report </div> </div>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	5 000			
3	1408 Management Improvements	30 000			
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	8 000			
8	1440 Site Acquisition				
9	1450 Site Improvement	22 172			
10	1460 Dwelling Structures	199 616			
11	1465.1 Dwelling Equipment—Nonexpendable	15 250			
12	1470 Nondwelling Structures	5 000			
13	1475 Nondwelling Equipment	21 000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	3 000			
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	309 038			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program: ID16P00250101 Capital Fund Program Replacement Housing Factor Grant No: N/A			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Nampa Housing Authority			Grant Type and Number Capital Fund Program #: ID16P00250100 Capital Fund Program Replacement Housing Factor #: N/A			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		5 000				
HA-Wide	Management Improvements	1408						
	a. Purchases PHA Software			25 000				
	b. Training on New Software			5 000				
HA-Wide	Architectual/Engineering Fees	1430		8 000				
HA-Wide	Install/Replace Rubber Tiles on Playground Area	1450		7 172				
HA-Wide	Landscape Improvements	1450		10 000				
ID2-1	Install Sprinklers	1450		5 000				
ID2-1	Replace approx. 1/3 of Exterior door locks (3 Locks per Unit)	1460	141 Locks	13 000				
ID2-1	Replace approx. ¼ of all Furnaces	1460	19 Units	28 500				
ID2-1	Replace Countertops and Hardware	1460	25 Units	12 500				
ID2-1	Complete Tub Inserts	1460	16 Units	25 600				
ID2-1	Remove Old Wall Air-Conditioners from Elderly Units	1460	16 Units	14 100				
ID2-1	Carpet Stairway in 4-BR Units and Carpet Stairway in 2 1-BR Units Above Admin. Area	1460		3 000				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Nampa Housing Authority		Grant Type and Number Capital Fund Program #: ID16P00250100 Capital Fund Program Replacement Housing Factor #: N/A			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
ID2-2	Replace Kitchen Cabinets/Countertops	1460	13 Units	36 650				
ID2-2	Replace Bathroom Vanities and Plumbing Hardware	1460	24 Units	34 700				
ID2-2	Replace Rear Doors & Molding	1460	45 Units	21 566				
ID2-2	Replace ¼ of Roofs	1460	12 Units	10 000				
ID2-1	Replace Refrigerators	1465.1	25 Units	9 000				
ID2-1	Replace Ranges	1465.1	25 Units	6 250				
ID2-1	Carpet & Paint Office Area	1470		5 000				
ID2-1	Replace Copier	1475.1	1	6 000				
ID2-1	Replace Maintenance Vehicle	1475.2	1	15 000				
HA-Wide	Relocation Costs	1495.1		3 000				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Capital Fund Program 5-Year Action Plan

Part I: Summary

PHA Name Nampa Housing Authority				x Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA- Wide	Year I 2001	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2003	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2004	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2005	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2006
	Annual Statement				
HA-Wide		\$121,940	\$197,640	\$159,140	\$171,140
ID2-1		\$103,975	\$139,875	\$114,875	\$53,125
ID2-2		\$260,575	\$404,225	\$196,175	\$167,275
ID2-5		----	----	\$84,150	----
ID2-6		----	----	----	\$84,150
CFP Funds Listed for 5-year planning		\$486,490	\$741,740	\$554,340	\$475,690
Replacement Housing Factor Funds		N/A	N/A	N/A	N/A

Capital Fund Program 5-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year: <u>2</u> FFY Grant: 2002 PHA FY: 2003			Activities for Year: <u>3</u> FFY Grant: 2003 PHA FY: 2004		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
HA-Wide	Operations	14,440	HA-Wide	Operations	14,440
	Management Improvements	30,000		Management Improvements	30,000
	Fees & Costs	12,500		Fees & Costs	12,500
	Landscape Improvements	12,500		Landscape Improvements	12,500
	Playground Area Tiles	15,000		Playground Area Tiles	15,000
				Concrete Stoops and Sidewalks	66,700
				Exterior Door Locks	14,500
	Exterior Door Locks	14,500		Hot Water Heaters	15,000
	Hot Water Heaters	15,000		2 Riding Mowers	9,000
				Playground Equipment	5,000
	Playground Equipment	5,000		Relocation	3,000
	Relocation	3,000		Subtotal	197,640
	Subtotal	121,940			
			ID2-1	Sprinkler System	15,000
ID2-1	Sprinkler System	15,000		Replace Furnaces	30,500
	Replace Furnaces	30,500		Kitchen & Bathroom Countertops	31,250
	Kitchen & Bathroom Countertops	31,250			
	Wall Air-Conditioners	14,100		Siding	50,000
				Refrigerators	10,000
	Refrigerators	10,000			
Total CFP Estimated Cost		\$			\$

Capital Fund Program 5-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year: <u>2</u> (Continued) FFY Grant: 2002 PHA FY: 2003			Activities for Year: <u>3</u> FFY Grant: 2003 PHA FY: 2004		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
ID2-1 (Continued)	Ranges	3,125	ID2-1 (Continued)	Ranges	3,125
	Subtotal	103,975		Subtotal	139,875
ID2-2			ID2-2		
	Kitchen Cabinets & Countertops	151,500		Sprinkler System	5,000
	Bathroom Vanities	56,550		Kitchen Cabinets & Countertops	151,500
	Exterior Doors & Molding	28,900		Bathroom Vanities	56,550
	Replace Roofs	13,500		Exterior Doors & Molding	28,900
	Replace Stair Tread on 42 2-Story Units	10,125		Replace Roofs	13,500
				Replace Stair Tread on 42 2-Story Units	10,125
				Interior doors	37,700
				Linoleum Tile	40,200
				Windows	49,500
				Refrigerators	6,000
				Ranges	5,250
	Subtotal	260,575		Subtotal	404,225
Total CFP Estimated Cost		\$486,490			\$741,740

Capital Fund Program 5-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year: 4 FFY Grant: 2004 PHA FY: 2005			Activities for Year: 5 FFY Grant: 2005 PHA FY: 2006		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
HA-Wide	Operations	14,440	HA-Wide	Operations	14,440
	Management Improvements	30,000		Management Improvements	30,000
	Fees & Costs	12,500		Fees & Costs	12,500
	Landscape Improvements	12,500		Landscape Improvements	12,500
	Concrete Stoops and Sidewalks	66,700		Concrete Stoops and Sidewalks	66,700
	Hot Water Heaters	15,000		Hot Water Heaters	15,000
	Playground Equipment	5,000		Playground Equipment	5,000
				Parking Areas	12,000
	Relocation	3,000		Relocation	3,000
	Subtotal	159,140		Subtotal	171,140
ID2-1	Furnaces	30,500			
	Kitchen & Bathroom Countertops	31,250			
	Siding	50,000		Siding	50,000
	Ranges	3,125		Ranges	3,125
	Subtotal	114,875		Subtotal	53,125
ID2-2	Sprinkler System	5,000	ID2-2	Sprinkler System	5,000
Total CFP Estimated Cost		\$			\$

Capital Fund Program 5-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year: 4 (Continued) FFY Grant: 2004 PHA FY: 2005			Activities for Year: 5 (Continued) FFY Grant: 2005 PHA FY: 2006		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
ID2-2 (Continued)	Exterior Doors & Molding	28,900			
	Replace Roofs	13,500		Replace Roofs	13,500
	Replace Stair Tread on 42 2-Story Units	10,125		Replace Stair Tread on 42 2-Story Units	10,125
	Interior Doors	37,700		Interior Doors	37,700
	Linoleum Tile	40,200		Linoleum Tile	40,200
	Windows	49,500		Windows	49,500
	Refrigerators	6,000		Refrigerators	6,000
	Ranges	5,250		Ranges	5,250
	Subtotal	196,175		Subtotal	167,275
ID2-5	Windows	36,300			
	Exterior Doors, Molding & Porch Supports	39,600			
	Refrigerators	4,400			
	Ranges	3,850			
	Subtotal	84,150			
			ID2-6	Windows	36,300
Total CFP Estimated Cost		\$			\$

Capital Fund Program 5-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year: 4 (Continued) FFY Grant: 2004 PHA FY: 2005			Activities for Year: 5 (Continued) FFY Grant: 2005 PHA FY: 2006		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
			ID2-6 (Continued)	Exterior Doors	39,600
				Molding & Porch Supports	
				Refrigerators	4,400
				Ranges	3,850
				Subtotal	84,150
Total CFP Estimated Cost		\$554,340			\$475,690

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-1 ID2-2 ID2-5 ID2-6	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1406 – Operations</u>		
Groundskeeper/Laborer Wages	32,760	2002 thru 2005
Miscellaneous Items	25,000	2002 thru 2005
<u>1408 – Management Improvements</u>		
Purchase Computer Hardware, Software and Miscellaneous Items	120,000	2002 thru 2005
<u>1430 – Fees and Costs</u>		
Architectual/Engineering/Consultant Fees	50,000	2002 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-1 ID2-2 ID2-5 ID2-6	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1450 – Site Improvements</u>		
Landscape Improvements	50,000	2002 thru 2005
Repair, Sealcoat and Install Stripping on Parking Areas	12,000	2005
Install and/or Replace Rubber Tiles on Playground Areas	30,000	2002 thru 2003
Repair and/or Replace Concrete Stoops and Sidewalks	200,100	2003 thru 2005
<u>1460 – Dwelling Structures</u>		
Replace Door Locks on 280 Exterior Doors	29,000	2002 thru 2003
Replace 120 Hot Water Heaters	60,000	2002 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-1 ID2-2 ID2-5 ID2-6	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1475.2 – Nondwelling Equipment</u>		
Purchase 2 New Riding Lawn Mowers	9,000	2003
<u>1475.3 – Nondwelling Equipment</u>		
Replace Playground Equipment	20,000	2002 thru 2005
<u>1495.1 – Relocation Costs</u>		
Temporary Relocation of Residents	12,000	2002 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-1	ID16P002001	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1450 – Site Improvement</u>		
Underground Sprinkler System	30,000	2002 thru 2003
<u>1460 – Dwelling Structures</u>		
Replace Furnaces in 73 Units	91,500	2002 thru 2004
Replace Kitchen and Bathroom Countertops Including Plumbing Hardware in 50 and 75 units, respectively	93,750	2002 thru 2004
Remove Old Wall Mounted Air-Conditioners in 16 Elderly Units	14,100	2002
Repair Paint and Replace Siding on 75 Units	150,000	2003 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-1	ID16P002001	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1465.1 – Dwelling Equipment - Nonexpendable</u>		
Purchase 50 New Refrigerators	20,000	2002 thru 2003
Purchase 50 New Ranges	12,500	2002 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-2	ID16P002002	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1450 – Site Improvement</u>		
Repair and/or Replace Existing Sprinkler System	15,000	2003 thru 2005
<u>1460 – Dwelling Structures</u>		
Replace Kitchen Cabinets, Countertops and Plumbing Hardware in 32 Units.	303,000	2002 thru 2003
Replace Bathroom Vanities and Plumbing Hardware in 21 Units	113,100	2002 thru 2003
Replace and Paint 135 Exterior Doors and Molding	86,700	2002 thru 2004
Replace Roofs on 45 Units	54,000	2002 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-2	ID16P002002	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1460 – Dwelling Structures (Continued)</u>		
Replace Stair Tread on 42 2-Story Units	40,500	2002 thru 2005
Replace and Paint Interior Doors Molding and Jambs in 45 Units	113,100	2003 thru 2005
Replace Existing Linoleum Floor Covering with Linoleum Tile in 45 Units	120,600	2003 thru 2005
Replace all Windows in 45 Units	148,500	2003 thru 2005
<u>1465.1 – Dwelling Equipment – Nonexpendable</u>		
Purchase 45 New Refrigerators	18,000	2003 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-2	ID16P002002	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
1465.1 Dwelling Equipment – Nonexpendable (Continued) Purchase 45 New Ranges	15,750	2003 thru 2005
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-5	ID16P002005	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1460 – Dwelling Structures</u>		
Replace All Windows in 11 Units	36,300	2004
Replace, Repair, Paint Exterior Doors, Brick Molding and Porch Supports on 11 Units	39,600	2004
<u>1465-1 – Dwelling Equipment – Nonexpendable</u>		
Purchase 11 New Refrigerators	4,400	2004
Purchase 11 New Ranges	3,850	2004
Total estimated cost over next 5 years		

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide) Nampa Housing Authority	
ID2-6	ID16P002006	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<u>1460 – Dwelling Structures</u>		
Replace All Windows in 11 Units	36,300	2005
Replace, Repair, Paint Exterior Doors, Brick Molding and Porch Supports on 11 Units	39,600	2005
<u>1465.1 – Dwelling Equipment – Nonexpendable</u>		
Purchase 11 New Refrigerators	4,400	2005
Purchase 11 New Ranges	3,850	2005
Total estimated cost over next 5 years	2,258,260	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an “x”) N1 _____ N2 _____ R _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of

Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary Original statement Revised statement dated:

Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							

3.						
----	--	--	--	--	--	--

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							

3.						
----	--	--	--	--	--	--

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators

1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Component 3, (6) Deconcentration and Income Mixing

- a. ☒ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes ☒ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

Required Attachment D: Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: Carol Farmer

B. How was the resident board member selected: (select one)?

- ☐ Elected
☒ Appointed

C. The term of appointment is (include the date term expires): August 2005

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: August 2001

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Maxine Horn, Mayor, Nampa, Idaho

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Jill Young
Collen Meltalf
Melynda Miller
Juliette Dorsett
Laura Wood
Sylvia Barba
Karen Phelps
Rachael Gonzales

Attachment F: Comments by Resident Advisory Board Regarding the Annual Plan for FY2001

The Resident Advisory Board met on three occasions to review and approve the FY 2001 Update. There were no suggestions for change as the plan is presented herein.

Attachment G: Description of the Community Service Program

All non-exempt residents over the age of 18 are required to participate in eight hours of community service per month, participate in the Family Self-Sufficiency Program or participate in a combination of the two equal to eight hours per month. A description of the Community Service Program policy is part of our lease. At lease review and signing, new occupants are briefed on this policy. The family is provide a resource list of agencies providing community service opportunities. And each family member over the age of 18 is required to sign a Certification of Community Service Exemption. At the time of recertification, the same process, as above, is repeated. Non-exempt family members are required to turn in a time sheet monthly. Any family member who fails to meet the annual requirement is provided an opportunity for cure during the next year. Failure then to comply will lead to termination of the family's lease.

Residents who indicate no means of income are required to complete a Survival Statement which indicates their sources of support. If the individual is determined eligible for community service, they are so advised and provided all the necessary information.

Attachment H: Pet Policy

The board of commissioners approved this PHA's pet policy in August 2000. Assistive and companion animals are allowed with no restrictions, except those imposed on all other tenants with animals regarding health, safety, sanitation, property damage and nuisance. No pet deposit is required for assistive/companion animals.

Prior approval of pets must be obtained. All dogs and cats must licensed, spayed and/or neutered in accordance with city code. The number and weight of pets is limited, except for assistive/companion pets. The pet deposit is \$250.00. Only damages and/or other expenses incurred by this PHA as a result of the pet can be applied to this deposit. The owner must be in control the of the pet at all times while on PHA property. Any pet, where it is sufficiently documented, presents a danger to residents or PHA employees or has become a nuisance to other residents, will be required to be removed from the premises.

Attachment I: Fair Housing Certification

This is to certify that I, as Executive Director, have reviewed our policies and procedures and have determined that we neither have any policies nor procedures which violate Fair Housing. This PHA does not have site-based waiting lists. A review of this PHA's distribution by race, Non-Hispanic and Hispanic, indicates an equal distribution of residents between north Nampa (more heavily Hispanic) and south/southwest Nampa (predominantly white).

Raymond B. Wahlert
Chairman, Board of Commissioners

Dan Braudrick
Executive Director

Attachment J: Progress in Accomplishing Goals

Five-Year Plan Goals.

Goal: Acquire or build units or developments. No progress has been made on this goal. We were involved with a downtown Nampa proposal to build a parking garage. We proposed putting elderly units above the garage. The downtown business owners have put the building of the garage on hold at this time.

Goal: Improve public housing management: (PHAS score) and concentrate on efforts to improve specific management functions (finance). The Nampa Housing Authority improved its financial and managerial scores of the PHAS. . Nampa Housing Authority's PHAS score for FY99 was 79.5 percent. The Financial Assessment was 15.8 points out of 30 (or 52.7 percent) and the Management Assessment was 25.9 (or 86.3 percent).

For FY00, the overall score increased substantially to 89.6 percent. The Financial Assessment score increased to 23.1 points (77 percent). The Management Assessment score to 28.7 points (95.7 percent). Of note, our physical inspections scores continue to result in evaluations over 95 percent.

Goal: Implement measures to deconcentrate poverty by bringing higher income households into lower income developments. This PHA has met the deconcentration requirements IAW 24 CFR Part 903 (December 22, 2000).

Goal: Implement public housing security improvements. We are in the process of establishing Neighborhood Watch Programs at all our sites. To date, 88 of our units participate in this program. At this time, 62 percent of all this PHA's units are involved in the Neighborhood Watch Program.

Goal: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability. The Executive Director is a member of the city's Fair Housing Committee and has reviewed PHA policies and procedures to ensure there are no barriers to accomplishing this goal. None were identified. This is a continuous process. All employees involved in the admissions and continued occupancy functions in this PHA attended at least one fair housing seminar/class.

Other PHA Goals and Objectives.

Goal: Improve the appearance and utility of NHA developments. Seventy-five of our units had exterior doors replaced (as necessary), all exterior doors, trim, and patios painted. All fencing was also painted. Fifty-seven units had new bathtub liners and surrounding laminate installed. All large trees were trimmed. Gutters and downspouts replaced. All parking areas were seal coated and re-stripped. A major effort was initiated

to improve the appearance of our grounds, specifically to remove weeds, mow and trim weekly.

Goal: Improve safety/security of residents and/or their perception thereof. Case Report Summaries are now received from the city police department to identify police calls at this PHA's units. A working relationship has been established and exercised with the local anti-drug unit. A Neighborhood Watch Program has been established for 62 percent of our residences.

Goal: Improve resident children opportunities to participate in after school and summer programs. All residents have been informed semi-annually that NHA will fund memberships for their children in the local Boys and Girls Club. The Executive Director of this PHA is a member of the Board of Directors of the local Boys and Girls Club. To date, no families have expressed a need for transportation of their children to the Boys and Girls clubhouse, despite offers of assistance in an NHA newsletter.

